



**TESTIMONY PRESENTED TO THE PUBLIC HEALTH COMMITTEE
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Testimony Supporting:

Governor's Bill No. 986 AN ACT PROTECTING MATERNAL HEALTH

Senator Anwar, Representative McCarthy Vahey, Senator Somers, Representative Klarides-Ditria and distinguished members of the Public Health Committee, thank you for the opportunity to offer testimony in support of Governor's Bill No. 986 *An Act Protecting Maternal Health*. I am Dr. Deidre Gifford, Executive Director of the Office of Health Strategy ("OHS"). OHS' mission is to implement comprehensive, data driven strategies that promote equal access to high quality health care, control costs, and ensure better health for the people of Connecticut.

Around the country, labor and delivery facilities in non-urban areas are facing challenges in remaining open and operational. Without thoughtful planning to provide additional access, such closures have the potential to reduce access to high quality maternity care and exacerbate disparities in adverse pregnancy outcomes. Governor's Bill No. 986 proposes to address this issue in part by expanding options for maternity care. This proposal would by establish licensing standards at DPH for birth centers, creating an accredited non-hospital alternative to hospital-based labor and delivery. Often staffed by nurse midwives, birthing centers are a safe alternative to hospital births and have been shown to provide high quality care for properly screened women with low risk pregnancies when appropriate arrangements for transfer are in place. In many cases the lower intensity, more home like atmosphere in a birth center is also preferred by families. In order to facilitate the establishment of these centers the proposal also exempts these birth centers from the Certificate of Need process.

This bill also proposes to join approximately fifteen other states in creating a certification pathway for doulas. This new certification will establish a consistent standard of care for these individuals that provide emotional and physical support for women throughout the prenatal and post-partum period, and will facilitate the establishment of sustainable payment strategies for doula care. Doula care is another evidence-based intervention that can reduce disparities, provide culturally and linguistically competent pregnancy care, and improve overall birth outcomes. OHS has convened the Community Health Worker Advisory Board, and has been working with the Community Health Worker professional organization to further establish this profession. Under a broad definition of Community Health Worker (CHW), doulas are a specially-trained type of CHW and OHS strongly supports their further development.

The Governor's bill also proposes that OHS partner with the Office of Early Childhood and other sister agencies to develop a universal nurse home visiting program. In this voluntary program, a registered nurse with specialized training provides evidence-based services in the home to families with newborns. This program will be designed to improve outcomes in child safety, child health and development, family economic self-sufficiency, maternal and parental health, positive parenting, reducing child mistreatment,

reducing family violence, and parent-infant bonding. It will include at least one visit during a newborn's first three months of life and include a follow-up visit, as well as referrals to address each family's unique needs. Unlike many states', CT's home visiting model pairs the nurse home visits with up to one year of support from a community health worker for those families at highest risk. These community health workers will be able to offer social and emotional support to new families facing a variety of challenges, whether economic, mental health, housing or other adverse experiences that we know put children at high risk for future health and educational challenges. OHS has partnered with OEC, DSS and DCF since the outset of the current program, and looks forward to working further to define a sustainable strategy to support this vital program. In particular, OHS anticipates working with commercial payers, as well as HUSKY, to ensure that insurance can support this evidence-based, cost effective and data driven strategy to support families and children.

OHS respectfully requests that the committee support Governor's Bill No. 986. I would like to again thank the committee for the opportunity to present this testimony, and I am happy to answer any questions you may have.